

Formality Review Claims Count Sheet

Date: / /

Case No. 10662592

Case Name with name

No.	State	Ind.	Dep.	No.	State	Ind.	Dep.	No.	State	Ind.	Dep.	No.	State	Ind.	Dep.
1				41				81				121			
2				42				82				122			
3				43				83				123			
4				44				84				124			
5				45				85				125			
6				46				86				126			
7				47				87				127			
8				48				88				128			
9				49				89				129			
10				50				90				130			
11				51				91				131			
12				52				92				132			
13				53				93				133			
14				54				94				134			
15				55				95				135			
16				56				96				136			
17				57				97				137			
18				58				98				138			
19				59				99				139			
20				60				100				140			
21				61				101				141			
22				62				102				142			
23				63				103				143			
24				64				104				144			
25				65				105				145			
26				66				106				146			
27				67				107				147			
28				68				108				148			
29				69				109				149			
30				70				110				150			
31				71				111				151			
32				72				112				152			
33				73				113				153			
34				74				114				154			
35				75				115				155			
36				76				116				156			
37				77				117				157			
38				78				118				158			
39				79				119				159			
40				80				120				160			
T. Ind.				T. Ind.				T. Ind.				T. Ind.			
T. Dep	29			T. Dep				T. Dep				T. D p			
Total	30			Total				Total				Total			